Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

209

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
_	·		(Column 1)		(Column 2)			TYPE		OR		ENTITY.	
TOTAL CLAIMS			17.					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUM	BER EXTRA		BASIC FE	E 385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			\ \ \ minus 20=		*	3		XS 9=		OR	X\$18=		
INDEPENDENT CLAIMS				ninus 3 =	* · (·	X43=		OR	X86=	<u> </u>	
М	JLTIPLE DEPE	NDENT CLAIM F	RESENT					+145≐		OR			
*	the difference	e in column 1 is	less than z	ero, enter	"0" in (column 2		TOTAL	12 X	OR	TOTAL		
	C	CLAIMS AS A	MENDED - PART II						3	OTHER	THAN		
_	·	(Column·1)	•	(Colum		(Column 3)	_	SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	PENDENT.		=		X43=		OR	X86=		
	FIRST PRESE	NTATION OF MI	JUIPLE DE	PENDENT	CLAIM			+145=		1	. 200-		
							L	TOTAL		OR	+290= TOTAL		
								DDIT. FEE		OR	ADDIT. FEE		
		(Column 1) CLAIMS		(Colum		(Column 3)							
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIOI PAID F	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**				X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		= .		X43= ·		OR	X86=	· .	
Ĺ	FIRST PRESE	NTATION OF ML	LTIPLE DEP	PENDENT	CLAIM		 -			1 1			
							L	+145=		OR	+290=		
							. A	TOTAL DOIT. FEE	•	OR ,	TOTAL ODIT. FEE		
•		(Column 1)		(Columi		(Column 3)	•	•					
MEN		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBE PREVIOU PAID FO	R JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent		Minus	###		=	十	X43=			X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	A00=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=		
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR	TOTAL DDIT. FEE		
Ť	he "Highest Num	nber Previously Paid ber Previously Paid	For" (Total or	SMACE is I Independent	ess than I) is the I	ਾਤ, enter "3." nighest number		DIT. FEE L in the appi	ropriate box				
											•		